Attachment B - Certificate of Formation and Certificate of Authority

See Attached

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "NOSELTEL, LLC", FILED IN THIS OFFICE ON THE FOURTEENTS DAY OF JANUARY, A.D. 2002, AT 12 O'CLOCK P.M.



3480082 8100

020023690

AUTHENTICATION: 1557302

DATE: 01-14-02

NC. 3743 P. 2

JAN. 14. 2002 11:47AM

GRAIG & MACAULEY

STATE OF DELAWARE

STATE OF DELAWARE SECRETARY OF STATE DIVISION OF CORPORATIONS FILED 12:00 PM 01/14/2002 020023690 - 3480082

NOBELTEL, LLC CERTIFICATE OF FORMATION

Pursuant to the provisions of the Delaware Limited Liability Company Act (the "Act"), the undersigned hereby certifies as follows;

- 1. Name of the Limited Liability Company. The name of the limited liability company formed hereby (the "LLC") is NobelTel, LLC.
- 2. <u>Agent for Service of Process</u>. The name and address of the resident agent for service of process for the LLC is The Corporation Trust Company, 1209 Orange Street, Corporation Trust Center, Wilmington, County of Newcastle, Delaware 19801.

[Remainder of page intentionally left blank]



OFFICE OF THE SECRETARY OF STATE

JESSE WHITE • Secretary of State

OCTOBER 25, 2002

0079563-1

TCS CORPORATE SERVICES INC 118 WEST EDWARDS STE 200 SPRINGFIELD, IL 62704-0000

RE NOBELTEL, LLC

DEAR SIR OR MADAM:

IT IS OUR PLEASURE TO APPROVE YOUR REQUEST TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS. ENCLOSED PLEASE FIND AN APPROVED APPLICATION OF ADMISSION.

THE LIMITED LIABILITY COMPANY MUST FILE AN ANNUAL REPORT PRIOR TO THE FIRST DAY OF ITS ANNIVERSARY MONTH (MONTH OF QUALIFICATION) NEXT YEAR. A PRE-PRINTED ANNUAL REPORT FORM WILL BE SENT TO THE REGISTERED AGENT AT THE ADDRESS SHOWN ON THE RECORDS OF THIS OFFICE APPROXIMATELY 60 DAYS PRIOR TO ITS ANNIVERSARY MONTH.

SINCERELY YOURS,

JESSE WHITE SECRETARY OF STATE

DEPARTMENT OF BUSINESS SERVICES LIMITED LIABILITY COMPANY DIVISION TELEPHONE (217)524-8008

Esse White

JW:LLC



OFFICE OF THE SECRETARY OF STATE

JESSE WHITE • Secretary of State

0079563-1

10/25/2002

TCS CORPORATE SERVICES INC 118 WEST EDWARDS STE 200 SPRINGFIELD, IL 62704-0000

RE NOBELTEL, LLC ASE: NOBELFONE

DEAR SIR OR MADAM:

APPLICATION TO ADOPT AN ASSUMED NAME HAS BEEN PLACED ON FILE AND THE LIMITED LIABILITY COMPANY CREDITED WITH THE REQUIRED FEE.

SINCERELY YOURS,

JESSE WHITE SECRETARY OF STATE

DEPARTMENT OF BUSINESS SERVICES LIMITED LIABILITY COMPANY DIVISION TELEPHONE (217)524-8008

esse White

JW:LLC

Form **LLC-45.5**

January 1998

George H. Ryan Secretary of State Department of Business Services Limited Liability Company Division Room 359, Howlett Building Springfield, IL 62756 http://www.sos.state.il.us

Payment must be made by certified check, cashier's check, Illinois

Illinois **Limited Liability Company Act**

Application for Admission to Transact Business

Must be typewritten

This space for use by Secretary of State

Date 10.25,2002)

Assigned File # 0079 563/ \$400

Filing Fee

This space for use by

FILED

OCT 2 5 2002

JESSE WHITE SECRETARY OF STATE

	mey's C.P.A.'s check or m payable to "Secretary of	" I And	roved:	TU 5							
1 1	mited Liability Com	nany name:	NOB	ELTEL, LLC							
	Timed Liability Com	party flamo		(Must comply with	Section	1-10 of ILLC	A or article 2 below applies.)				
2.	The assumed name, other than the true company name, under which the LLC proposes to transact business in Illinois is: (If applicable, a form LLC-1.20, Application to Adopt an Assumed Name, is required to be completed and attached to this application.)										
3.	Federal Employer Identification Number (F.E.I.N.): 04-3429785										
4.	Jurisdiction of Org	anization: De	lawa	'e							
5.	Date of Organizati	on: January 1	14, 20	02							
6.	Period of Duration: Perpetual (See #14 on back)										
7.	•	•		•			ned in the jurisdiction of its t office box alone and c/o are				
	5759 Fleet Street						•				
	Number			Street			Suite				
	Carisbad	CA	9	2008			500 13000				
	City/State			ZIP Code			County				
8.	Registered agent:	TCS Corporate Services, Inc.									
	rtegistered agent.	First Name		Middle Name			Last Name				
	Registered Office:	118 West Edv	vards				Ste. 200				
	rtogistered Office.	Number		Street		· · · · · · · · · · · · · · · · · · ·	Suite #				
	(P.O. Box or c/o	Springfield		Sangamo	n	Illinois	62704				
	are unacceptable	City		County			ZIP Code				
9.	The date on which	h this foreign	LLC	first did busines	ss in III	inois. Upo	on qualification				

LLC-45.5

10. The purpose or purposes for which the company is organized and proposes to conduct in this State: Include the business code # (IRS Form 1065).

Provide Telecommunication Services

11. The limited liability company is managed by:

□ manager(s)

▼ vested in member(s)

- 12. The Illinois Secretary of State is hereby appointed the agent of the limited liability company for service of process under the circumstances set forth in a subsection (b) of Section 1-50 of the ILLCA.
- 13. This application is accompanied by a certificate of good standing or existence, as well as a copy of the articles of organization, as amended, duly authenticated within the last thirty (30) days, by the officer of the state or country wherein the LLC is formed.
- 14. If the period of duration is a date certain and is not stated in the Articles of Organization from the domestic state, a copy of that page from the Operating Agreement stating the date must also be submitted.
- 15. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact business is to the best of my knowledge and belief, true, correct and complete.

Dated September 13, 19 2002

(Signature) (Signature must comply with Section 5-45 of ILLCA)

(Type or print name and title)

*(if applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC.)

*Please refer to Sections 178.20(d) and (e) of the Administrative Rules
LLC-17.3

Form **LLC-1.20**

March 2002

Jesse White

Secretary of State
Department of Business Services
Limited Liability Company Division
Room 351, Howlett Building
Springfield, IL 62756
http://www.ilsos.net

Payment may be made by business firm check payable to Secretary of State. (If check is returned for any reason this filing will be void.)

Illinois Limited Liability Company Act

- a. Application to Adopt an Assumed Name
- b. Application to Change An Assumed Name
- c. Application to Cancel An Assumed Name

Filing Fee: (see note)

Submit in Duplicate

Must be typewritten

This space for use by Secretary of State

Date 10-25-2002

Assigned File# 0079 563 /

FilingFee

\$ 90.00

Approved: //

This space for use by Secretary of State

FILED

OCT 2 5 2002

JESSE WHITE SECRETARY OF STATE

1.	Limited Liability Company name: NOBELTEL, LLC								
2.	File number assigned by the Secretary of State: 0079 5631								
3.	Federal Employer Identification Number (F.E.I.N.): 04-3429785								
4.	The state or country under the laws of which the limited liability company is organized is: (check one)								
	Illinois (domestic)								
5.	Date organized (if an Illinois limited liability company) or date authorized to transact business in Illinois (if a foreign limited liability company):								
6.	The limited liability company intends to adopt and to transact business under the assumed name of:NobelFone								
7.	The right to use the assumed name shall be effective from the date this application is filed by the Secretary of State until $10-1-1$, 20 05 , the first day of the limited liability company's anniversary month in the next year which is evenly divisible by five.								
8.	TO CHANGE: (a) The above-named limited liability company intends to cease transacting business under the assumed name of:								
	(b) and to commence transacting business under the new assumed name:								
9.	TO CANCEL: The above-named limited liability company intends to cease transacting business under the assumed name of:								

10. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application to adopt, change, or cancel an assumed name is to the best of my knowledge and belief, true, correct and complete.

Dated	10/9/02	2002
(Worth & Day)	(Year)
Jarod R	Yaffe, Member	
	(Type or print Name and Title)	
	(If applicant is a company or other entity, state name of company	

(If applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC.)

- NOTE: a. An assumed name may be adopted in 5 year increments. The right to use an assumed name shall be effective from the date of filing by the Secretary of State until the first day of the anniversary month of the limited liability company that falls within the next calendar year evenly divisible by 5.
 - b. The filing fee to adopt an assumed name is \$150 for each year or part thereof ending in 0 or 5, \$120 for each year or part thereof ending in 1 or 6, \$90 for each year or part thereof ending in 2 or 7, \$60 for each year of part thereof ending in 3 or 8, \$30 for each year or part thereof ending in 4 or 9.
 - c The fee to change an assumed name is \$100.
 - c The fee for canceling an assumed name is \$100.
 - e. An assumed name may be renewed 60 days prior to the expiration of the right to use the assumed name, for a period of 5 years, by making an election to do so at the time of filing its annual report and by paying the renewal fees as prescribed by this Act.